

is better able to attain its ends; and on that account those who actually or supposedly have dedicated themselves to special scientific advancement should appreciate that they also must be interested in organized medicine in common with all other fellow physicians who likewise practice scientific medicine; but who, in addition, feel the urge and do their parts when called on to support organized medicine in what it hopes to accomplish. Scientific and organized medicine are part and parcel of one whole, each a complement to the other, each necessary to the other, and both essential, if the highest types of scientific advancement and healing-art service are to be realized and made possible for fellow citizens.

### AMBASSADOR EDGE'S PLACEMENT OF MEDICAL PRACTICE IN THE "SOCIAL SECURITY PROGRAM"

**Address of Former Ambassador Edge at Atlantic City.**—At the joint meeting of the American and Canadian Medical Associations held at Atlantic City on May 11 last, the Hon. Walter Evans Edge of New Jersey, former United States Ambassador to France, was one of the speakers; addressing the assembly, according to the *Atlantic City Press*, as follows:

"Another speaker, Walter E. Edge, former Ambassador to France, told the physicians that world problems would have long ago been solved had the achievements of statesmen measured up to those of the medical profession.

"After briefly alluding to the New Deal program, Mr. Edge continued: 'If one makes even a cursory examination of the pending so-called "Social Security Program," you will note suggestions of state or national control in many of its provisions. When one considers the responsibility of the health of the nation, certainly that should be one activity that the politicians should let alone. These new ideas of state medical practitioners to take the place of the independent doctor appeal to me not at all.'

"After reviewing some of the achievements of the medical profession, he said: 'The voluntary service of the medical profession, of course, has no parallel in and will never receive the real appreciation it richly deserves. If statesmen could cure a few of the ills of the body politic in even slight comparison to the scientific advances you have brought about in physical cures, the world long ago would have solved many of the problems which affect us today.'

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**Ambassador Edge's Advice Is Commended to the Consideration of Certain Lay Propagandists.**—The above thoughts, coming from an American statesman of such prominence, are respectfully called to the attention of those lay persons, both in civil and political life, who may find themselves possessed by an urge to solve, through statutory enactments as yet untried in America, some of the economic and sickness problems related to certain social welfare needs.

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**The Medical Profession Has Always Cared for the Poor.**—When one stops to consider that from one end of the United States to the other, physicians have at all times met their altruistic obligations to their lay fellows in far greater

amount and proportion than can be claimed for any other profession or vocation; and that, in these days of economic stress and strain, in spite of their own financial hardships, they are continuing to give most generous service to the poor, it cannot be construed as unreasonable or improper conduct when the members of the profession scan closely the past careers and motivating forces and ambitions of some of the lay individuals who presume to have special knowledge in medical relief work, and who have taken it upon themselves to outline the paths along which the many thousands of licensed physicians should carry on medical practice in the future.

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**The Experience of Physicians as Against the Theories of Propagandists.**—The members of the medical profession do not claim that their viewpoints on sickness relief are infallible; but by and large, they do believe, and with right—because of close-up, first-hand and more accurate and comprehensive understanding of the subject—that, other things being equal, the conjoint opinion of physicians should have as great and more merit than that of a handful of lay theorists and propagandists who, self-constituted in their imaginary leadership, are quite insistent that the plans they outline should be followed by medical men.

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**The Lay Propagandists May Now Turn Their Forces on Legislatures.**—The pressure to which, in recent years, the medical profession has been subjected by some of these lay propagandists and publications (now that they have found that the medical profession cannot be easily moved to approve illy-matured plans or laws on sickness relief for low-bracket income groups of our population) will probably, in the days to come, be exerted with even greater force upon members of our legislatures, in the hope of securing certain legal enactments under the guise of sorely needed medical relief, even though the medical profession is opposed to the methods therewith submitted.

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**The Exaggeration of Sickness Hardships.**—It is well to keep in mind that there has been much exaggeration in the portrayal of isolated cases of unhappy social and economic conditions associated with unforeseen sickness; such special instances being used only too often to lay down premises from which general conclusions may be drawn that would favor the institution of the social and sickness relief procedures advocated by such proponents.

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**Time Has Arrived for Some Clear Thinking.** Is it not time that clear thinking and plain talking should again become the order of the day? The handicaps arising from unexpected illness no one will deny, but it is well to remember that in many, if not most of such cases, the resultant hardships are not directly due to such illness but, rather, are dependent on underlying conditions

such as poverty and other social and economic factors. The causes of poverty and of faulty habits and living should, therefore, first be sought, and remedial legislation should be aimed at these fundamental conditions. Such a method of approach would be more rational than to seek to secure an alleviation of these faults of present-day civilization through laws which, if hastily drafted and ill-adapted to American conditions, would upset and demoralize those methods of medical practice that, step by step, have gradually come into existence; largely through the mutual coöperation, on the one hand, of a profession whose members surpass all others in its altruistic endeavors, and, on the other, of a lay public that was responsive to and appreciative of the service rendered its members by practitioners of the healing art.

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**Legislators Should Think and Investigate Propaganda from Lay Sources.**—Legislators are, therefore, amply justified when they measure and carefully investigate the claims of lay propagandists, who, self-appointed in many instances, assume to be the real fountain heads of knowledge as to the manner in which medical practice should be carried on, both regarding economic and healing-art standpoints. The sound and analytical conservatism that has played so important a part in the real advances of scientific medicine can be used with equally good results in the diagnosis and evaluation of methods of treatment of social welfare and sickness-relief problems. Let us not be carried off our feet in favor of unwise legislation that would lower scientific medicine to cultist or mechanistic standards.

## EDITORIAL COMMENT\*

### ACUTE MERCURY POISONING

In the *Journal* of the American Medical Association, No. 16, April 21, 1931, Sanford M. Rosenthal published some experimental and clinical researches showing that the use internally and intravenously of "sodium formaldehyde sulphoxalate" has a marked antidotal effect in poisoning by mercury bichlorid, in both dogs and human beings.

Encouraged by the results of his experiments upon dogs, he was led to extend the use of the above drug to ten persons who had taken large doses of mercury bichlorid with suicidal intent. All of these patients came under treatment within two hours or less, and all recovered, as did nine of the twelve experimental dogs.

The method which he suggests for practical use as an antidote for mercury poisoning is as follows: Gastric lavage is done with a 5 per cent solution

of the "sulphoxalate" in distilled water, 200 cubic centimeters of this solution being left in the stomach.

Following this, 10 grams of "sulphoxalate," dissolved in 100 to 200 cubic centimeters of distilled water, is introduced intravenously, 20 to 30 minutes being required for the injection. Another intravenous injection of 5 grams of the same drug, in similar dilution, may be administered after 4 to 6 hours in severe cases.

The usual deleterious effects of mercury on the kidneys were largely prevented. The presence or absence in the blood of the "sulphoxalate," as shown by the precipitation of mercury in a bichlorid solution, will furnish an indication as to whether or not further sulphoxalate is needed, 3 to 5 hours after the first injection.

When a colitis results from the mercury poisoning, the author advises high colonic irrigations, with a 1 to 1,000 sulphoxalate solution.

Commercial "sodium formaldehyde sulphoxalate" is impure and should not be used intravenously. The purified product can be obtained in ampoules from the manufacturers of "nearsphenamin".<sup>1</sup> The solution in distilled water must always be freshly prepared.

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<sup>1</sup> Merck & Company, New York, The Diarsenal Company, Inc., Buffalo; The Dermatological Research Company, Philadelphia.

*Sleep.*—There are a great many persons who habitually assume a last-resort attitude toward the bedroom. For these persons business, recreation and the indulgences of life all maintain a priority over sleep. If will power and inclinations were the controlling forces of existence, such a position might be justified. Unfortunately, however, such is not the case.

In spite of man's progress and great scientific achievements, the fact remains that so far as his body is concerned, he is just as dictatorially controlled by nature as he was in the Garden of Eden. Old Dame Nature at that time established some very definite laws regarding bodily requirements; and while, of course, she gives man his head as to his obedience to them, she invariably exacts her price if her mandates are consistently violated.

Only the other day, for instance, a learned scientist whose intellect was the envy and admiration of many, so forgot first principles that he worked day and night developing a mathematical formula. A sudden breakdown was the result. And in forty-eight hours he was dead.

While this is an uncommon case, it nevertheless typifies the general snubbing that nature receives by many who in their absurd conceit imagine that the basic living rules can be habitually broken without penalty.

Sleep is one of the prime essentials in the animal kingdom; and this is true whether the animal be a cat, a dog, or well-educated man.

Of course there is a very limited number of persons who thrive on less sleep than others. However, generally speaking, the majority of mature persons require eight hours of sleep each night. And younger persons—many of whom, alas, do not get it—require more.

It may be somewhat of a blow to one's pride, but it will be a boon to one's life to realize that nature, and not man, possesses the final authority on the sleep question.

\* This department of CALIFORNIA AND WESTERN MEDICINE presents editorial comment by contributing members on items of medical progress, science and practice, and on topics from recent medical books or journals. An invitation is extended to all members of the California and Nevada Medical Associations to submit brief editorial discussions suitable for publication in this department. No presentation should be over five hundred words in length.